JULIETTE MANOR

169 EAST HURON STREET

BERLIN 54923 Phone: (920) 361-3092 Ownership: Nonprofit Church-Related

Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled
Operate in Conjunction with Hospital? Yes Operate in Conjunction with CBRF? No
Number of Beds Set Up and Staffed (12/31/00): 92 Title 18 (Medicare) Certified? Yes
Total Licensed Bed Capacity (12/31/00): 100 Average Daily Census: 71

Number of Residents on 12/31/00: 68

Services Provided to Non-Residents		Age, Sex, and Primary Diagn	osis of	Residents (12/3	1/00)	Length of Stay (12/31/00)	%
Home Health Care	No	Primary Diagnosis	 %	Age Groups	%	Less Than 1 Year	35. 3
Supp. Home Care-Personal Care	No					1 - 4 Years	44. 1
Supp. Home Care-Household Services	No	Developmental Disabilities	1.5	Under 65	4. 4	More Than 4 Years	20. 6
Day Services	No	Mental Illness (Org./Psy)	13. 2	65 - 74	11.8		
Respite Care	No	Mental Illness (Other)	2. 9	75 - 84	32. 4		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	47. 1	****************	******
Adult Day Health Care	No	Para-, Quadra-, Hemi plegic	0.0	95 & 0ver	4.4	Full-Time Equivalen	t
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 Re	si dents
Home Delivered Meals	No	Fractures	8.8		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	14. 7	65 & 0ver	95. 6		
Transportation	No	Cerebrovascul ar	8.8			RNs	10. 0
Referral Service	No	Diabetes	1.5	Sex	%	LPNs	6. 8
Other Services	No	Respi ratory	5. 9			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	42.6	Male	20. 6	Aides & Orderlies	40. 1
Mentally Ill	No			Female	79. 4		
Provi de Day Programming for		[100.0				
Developmentally Disabled	No				100. 0		

Method of Reimbursement

	Medicare (Title 18)			Medicaid (Title 19)			0ther		Private Pav			,	Managed Care			Percent	
		(1111)	e 16) Per Die		(II tie	Per Die		ocn	Per Die			Per Dien		_	e care Per Diem	Total	Of All
	3.7	0/			0.4			0/									
Level of Care	No.	%	Rate	No.	. %	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0. 00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	5	100. 0	\$199. 17	38	79. 2	\$96. 25	0	0. 0	\$0.00	15	100. 0	\$125.00	0	0. 0	\$0.00	58	85. 3%
Intermediate				10	20. 8	\$79.61	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	10	14. 7%
Limited Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Dev. Di sabl ed				0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	5	100.0		48	100. 0		0	0.0		15	100.0		0	0.0		68	100.0%

JULIETTE MANOR

Nursing Care Required (Mean)*

**********	*****	********	*******	*****	******	********	******
Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	ions, Services	, and Activities as of 12/	31/00
Deaths During Reporting Period							
				9	% Needi ng		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	12. 0	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	5.3	Bathi ng	0. 0		88. 2	11.8	68
Other Nursing Homes	14. 7	Dressi ng	17. 6		72. 1	10. 3	68
Acute Care Hospitals	60.0	Transferring	36. 8		54. 4	8. 8	68
Psych. HospMR/DD Facilities	4.0	Toilet Use	22. 1		61.8	16. 2	68
Rehabilitation Hospitals	0.0		69. 1		20. 6	10. 3	68
Other Locations	4. 0	************************************	********	*****	******	*********	******
Total Number of Admissions	75	Conti nence		%	Special Trea	tments	%
Percent Discharges To:		Indwelling Or Extern	al Catheter	14. 7	Recei vi ng	Respiratory Care	5. 9
Private Home/No Home Health	10. 3	0cc/Freq. Incontinen	t of Bladder	39. 7	Recei vi ng	Tracheostomy Care	1. 5
Private Home/With Home Health	12.6	0cc/Freq. Incontinen	t of Bowel	19. 1	Recei vi ng	Sucti oni ng	1. 5
Other Nursing Homes	3.4				Recei vi ng	Ostomy Care	5. 9
Acute Care Hospitals	4.6	Mobility			Recei vi ng	Tube Feedi ng	1. 5
Psych. HospMR/DD Facilities	1. 1	Physically Restraine	d	2. 9	Recei vi ng	Mechanically Altered Diets	35. 3
Rehabilitation Hospitals	0.0						
Other Locations	10. 3	Skin Care			Other Reside	nt Characteristics	
Deaths	57. 5	With Pressure Sores		4.4	Have Advan	ce Directives	79. 4
Total Number of Discharges		With Rashes		1.5	Medi cati ons		
(Including Deaths)	87				Recei vi ng	Psychoactive Drugs	57. 4

Thi s Other Hospital-Al l Facility Based Facilities Facilties | % % % Ratio Ratio Occupancy Rate: Average Daily Census/Licensed Beds 71.0 87.5 0.81 84. 5 0.84 Current Residents from In-County 57.4 83.6 0.69 77. 5 0.74 Admissions from In-County, Still Residing 13.3 14. 5 0.92 21.5 0.62 Admissions/Average Daily Census 105.6 194. 5 0.54 124. 3 0.85 Discharges/Average Daily Census 122. 5 199.6 0.61 126. 1 0.97 Discharges To Private Residence/Average Daily Census 28. 2 102.6 0.27 49. 9 0.56 Residents Receiving Skilled Care **85**. 3 91. 2 0.93 83. 3 1.02 Residents Aged 65 and Older 95.6 91.8 1.04 87. 7 1.09 Title 19 (Medicaid) Funded Residents 70.6 1.06 **69.** 0 1.02 66. 7 Private Pay Funded Residents 22. 1 23. 3 0.95 22.6 0.98 Developmentally Disabled Residents 1.5 1.08 7. 6 0.19 1.4 Mentally Ill Residents 16. 2 30.6 0.53 33. 3 0.49 General Medical Service Residents 42.6 19. 2 2. 22 18. 4 2.31 41.5 51.6 0.80 49. 4 Impaired ADL (Mean)* 0.84 Psychological Problems 57.4 52.8 1.09 **50**. 1 1.15

7. 2

0.92

7.8

7. 2

1.00
